## APPLICATION DATA SHEET

## **Application Information**

Application Type:: Regular

Subject Matter:: Utility

CD-ROM or CD-R?:: None

Title Line One:: LASER-PRODUCED PLASMA EUV LIGHT SOURCE

Title Line Two:: WITH ISOLATED PLASMA

Attorney Docket Number:: NGC-00063 (48-0059)

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure:: 2

Total Drawing Sheets:: 2

Small Entity:: No

Secrecy Order in Parent Appl?:: No

## **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship County:: US

Status:: Full Capacity

Given Name:: Jeffrey

Middle Name:: R.

Family Name:: Hartlove

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State or Province

of Residence:: CA

Country of Residence: US

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City of mailing address:: Rolling Hills Estates

State or Province of

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Country of mailing address:: US

Postal or Zip Code of

mailing address: 90274

Applicant Authority Type:: Inventor

Primary Citizenship County:: US

Status:: Full Capacity

Given Name:: Mark

Middle Name:: E.

Family Name:: Michaelian

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State or Province

of Residence:: CA

Country of Residence: US

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City of mailing address:: Lomita

State or Province of

mailing address:: CA

Country of mailing address:: US

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Applicant Authority Type:: Inventor

Primary Citizenship County:: US

Status:: Full Capacity

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State or Province

of Residence:: CA

Country of Residence: US

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City of mailing address::

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State or Province of

mailing address::

CA

Country of mailing address::

US

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mailing address:

90731

Applicant Authority Type::

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Primary Citizenship County::

US

Status::

Full Capacity

Given Name::

Steven

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W.

Family Name::

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90503

Applicant Authority Type::

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Primary Citizenship County::

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Status::

**Full Capacity** 

Given Name::

Stuart

Middle Name::

J.

Family Name::

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Applicant Authority Type:: Inventor

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Status:: Full Capacity

Given Name:: Fernando

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Country of Residence: US

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Country of mailing address:: US

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Applicant Authority Type:: Inventor

Primary Citizenship County:: US

Status:: Full Capacity

Given Name:: Richard

Middle Name:: H.

Family Name:: Moyer

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State or Province

of Residence::

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## **Assignment Information**

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